

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	12/21/00
<b>FORMALITY REVIEW</b>	BZ	897	04-19-01
<b>RESPONSE FORMALITY REVIEW</b>	LT	106	11/5/01
	BZ	297	12-13-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/5/02
2	3/5/02
3	3/5/02
4	3/5/02
5	3/5/02
6	3/5/02
7	3/5/02
8	3/5/02
9	3/5/02
10	3/5/02
11	3/5/02
12	3/5/02
13	3/5/02
14	3/5/02
15	3/5/02
16	3/5/02
17	3/5/02
18	3/5/02
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32	✓
33	✓
34	✓
35	✓
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40	✓
41	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here